

CITY OF LA HABRA

P. O. Box 785, La Habra, CA 90633-0785 (562) 383-4065

BUSINESS LICENSE APPLICATION

Please correct or complete ALL items on the front and back of application.

Please Check One

- **New Application**
- Change of Owner
- Change of Address
- □ Change of Business Name
 □ HOME OCCUPATION

Business Name Corporate Name (if applicable)			OFFICIAL USE ONLY Business License No. City Classification S.I.C. Number
Business Location	(Cannot be P.O. Box per State of California Business & Professions	Code-Section 17538.5)	Bus. Start Date Resale No.
Mailing Address	City	State Zip	Federal ID No. State ID No.
Phone No.	City Fax N	State Zip No.	State Lic. No. State Lic. Type
	orporation		
Enter below names	of Owners, Partners, or Corporate Office		· ·
1st Owner Name	Title		_ Date of Birth
Home Address (Cannot be P.O. Box)			_ Driver Lic. No.
Home Phone No.	Cell / Pager N	0	- -
2nd Owner Name		Title	Date of Birth
Home Address (Cannot be P.O. Box)			Driver Lic. No.
Home Phone No.	Cell / Pager N	0.	_
	cy, please contact (attach additional sheet,		
Contact Name			Phone No.
Address			Cell/Pager No.
Property Owners In	formation (attach additional sheet, if necessa	ıry)	
Name			Phone No.
Address			
PREVIOUS YEAR II	NFORMATION - CONFIDENTIAL	Base Fee	Fire Dept. Insp. Fee
Gross Receipts		Est. Gross Receipts Tax	Name and/or
Sales Tax Paid		Vehicle Tag	Address Change Coin Operated
Gross Annual Payro		Insp. Fee	Vending Machines
Square Footage of B		(One Time Only) Partner or Professional	Penalty Processing Fee
Number of Employee		\$35.00 each Each Other Employee \$5.00 each	State CASp Fee \$ 1.00
Full-Time	Part-Time	Each Apt. Unit Over 3 \$6.50 each	TOTAL DUE \$
Do you use or proce		and significant responsibility th with buildings open to the pu obligations and how to comply w Division of the State Architect	e law, compliance with disability access laws is a serious at applies to all California building owners and tenants ublic. You may obtain information about your legal with disability access laws at the following agencies: The at www.dgs.ca.gov/dsa/Home.aspx . The Department of https://www.dgs.ca.gov/dsa/Home.aspx .
	Ities of perjury that this application and any a true, correct and complete statement of fa		examined by me, and to the best of my knowledge
Signature of Owner	or Representative:		Date:
	RETURN APPLICATION TO ABOVE AD	DRESS AND MAKE CHECK PAYAB	LE TO CITY OF LA HABRA.

PLEASE COMPLETE THE	FOLLOWING INFORMATION	
Name of Business:		
Business Address:		
NPDES PERMIT REQUIREMENTS:		
* WDID NO.:	A STATE OF THE PARTY OF THE PAR	
* Do you have an approved Storm Water Pollution Plan on-site?	Yes D No D	
* Do you have a Spill Prevention Program in place?	Yes No D	
* Assessors Parcel No. (APN)	CITY OF LA HABICA	
BUSINESS ACTIVITY INFORMATION:		
Hours of Operation:		
If business has a seperate STORAGE OR CORPORATION YARD, ind	cate the location:	
Do you have any other City Permits? (i.e. CUP, ZV, etc.) LOT SIZE:	Yes □ No □	
* Single Business Lot: Enter total square feet of lot:		
* Multi-Tenant Lot: Enter total square feet of business:		
Is Company Headquartered in La Habra? Yes 🗖 No 🗖 If no,		
	Title	
Phone No.: ()	Email Address:	
PUBLIC SAFETY BUSINESS LICENSE I	NFORMATION (additional permits may be required)	
Alarm System? Burglar Alarm System: Yes D No D Burglar Alarm Company Name:	Fire Alarm System: Yes No No Phone No.: ()	
Address:	·	
Installation Date:		
Fire Alarm Company Name:	Phono No : ()	
Address:		
Installation Date:	LICENSE NO	
Please list any HAZARDOUS MATERIALS used, stored, or transported	l?	
Will your business have PUBLIC ASSEMBLY over 50 people? (Restaurant, bar, theatre, bowling, etc.)	Yes □ No □ (Fire Inspection Permit Required)	
Is the business involved in any way with FIREARMS or EXPLOSIVES?	Yes □ No □	
Does the business dispense or sell ALCOHOLIC BEVERAGES?	Yes □ No □	
HOME O	CCUPATION	
La Habra Home Business Yes 🗆 No 🗀 If yes, o	omplete the following questions:	
Home Occupation Permit Control No.		
Home Occupation Permit Approved Date:		
NOTE: When you have filled out this form, signed it, and paid the compayment of a business licese tax and issuance of a Business License		

any applicable federal, state or local laws or regulations.

As the owner or operator you must comply will all applicable zoning and public safety regulations and obtain all required permits.

Issuance of a business license does not authorize remodeling or tenant improvement without first obtaining plan review, building permits or inspections by the Building and Safety Division. For details on these or related construction issues, please contact the Building and Safety Division at (562) 905-9710.